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transmittal form

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Statement under 37 CFR 3.73(b)Total # of pages including this sheet - 4

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PTO/SB/21 (05-04)


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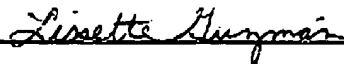
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TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/779,993	RECEIVED CENTRAL FAX CENTER
	Filing Date	02/17/2004	
	First Named Inventor	James D. Lewis, Jr.	OCT 21 2005
	Art Unit	3728	
	Examiner Name	Jila M. Mohandesi	
Attorney Docket Number	HT-5755 DIV		
Total Number of Pages in This Submission		3	

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Statement under 37 CFR 3.73 (b)
Remarks <input style="width: 100%;" type="text"/>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Baxter International Inc.		
Signature			
Printed name	Ira D. Finkelstein		
Date	October 21, 2005	Reg. No.	44,680

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Lisette Guzman	Date	October 21, 2005

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PTO/SB/82 (04-05)

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**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/779,993
Filing Date	02/17/2004
First Named Inventor	James D. Lewis Jr.
Art Unit	3728
Examiner Name	Mohandesi, Jila M.
Attorney Docket Number	HT-5755 DIV

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: 29200☒ Please change the correspondence address for the above-identified application to:☒ The address associated with
Customer Number:

29200

OR

☐ Firm or
Individual Name

Address

City

State

Zip

Country

Telephone

Email

I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Signature

Name

Michael C. Schiffer

Date

October 20, 2005

Telephone

849/474-6405

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

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PTO/SB/98 (09-04)

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STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Baxter International Inc. and Baxter Healthcare S.A.Application No./Patent No.: 10/779,993 Filed/Issue Date: 02/17/2004Entitled: Albumin in a Flexible Polymeric ContainerBaxter International Inc. and Baxter Healthcare SA, a Corporation

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.
The extent (by percentage) of its ownership interest is _____ %

in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 015072, Frame 0119, or for which a copy thereof is attached.

OR

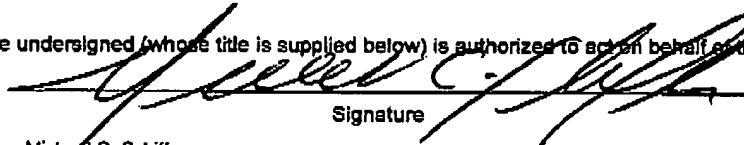
- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
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☐ Additional documents in the chain of title are listed on a supplemental sheet.☐ Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.



Signature

October 20, 2005

Date

Michael C. Schiffer

Printed or Typed Name

949/474-8405

Telephone Number

Additional Authorized Officer and Attorney-in-Fact
 Title

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